

Postgraduate

MEDICAL EDUCATION & TRAINING

Annual Report 2020



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About Us

The NES Medical Directorate's primary responsibility is the education and training of doctors in Scotland.

We are also responsible for the appraisal and re-validation of all doctors in Scotland as well as a number of cross cutting and multi-professional programmes, including patient safety, quality improvement of patient care and the development of Scotland's remote and rural workforce.

Most of our focus is on the training of Scotland's 6000 postgraduate trainee doctors who deliver care every day while in hospitals and general practices within NHS Scotland. We oversee this training, making sure it meets the regulatory standards of the GMC and that trainees make the right progress.

Through distribution of Additional Cost of Teaching (ACT) funding, we support the undergraduate medical education and training delivered by Scotland's 5 medical schools: making sure significant resources are used properly to underpin the clinical teaching of medical students in hospitals and general practices.

The continuing development of doctors is another key task and we support many educational and training initiatives for fully trained Consultants, General Practitioners and Associate Specialists.

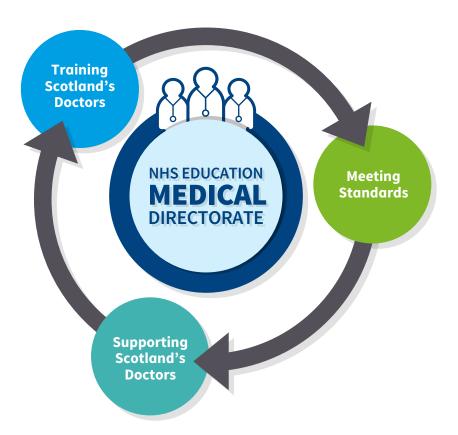
Alongside this we lead on multiprofessional training schemes for pharmacists, general practice nurses and general practice managers, whilst having a pivotal role in relevant research through our involvement in the Scottish Medical Education Research Consortium.

About Us

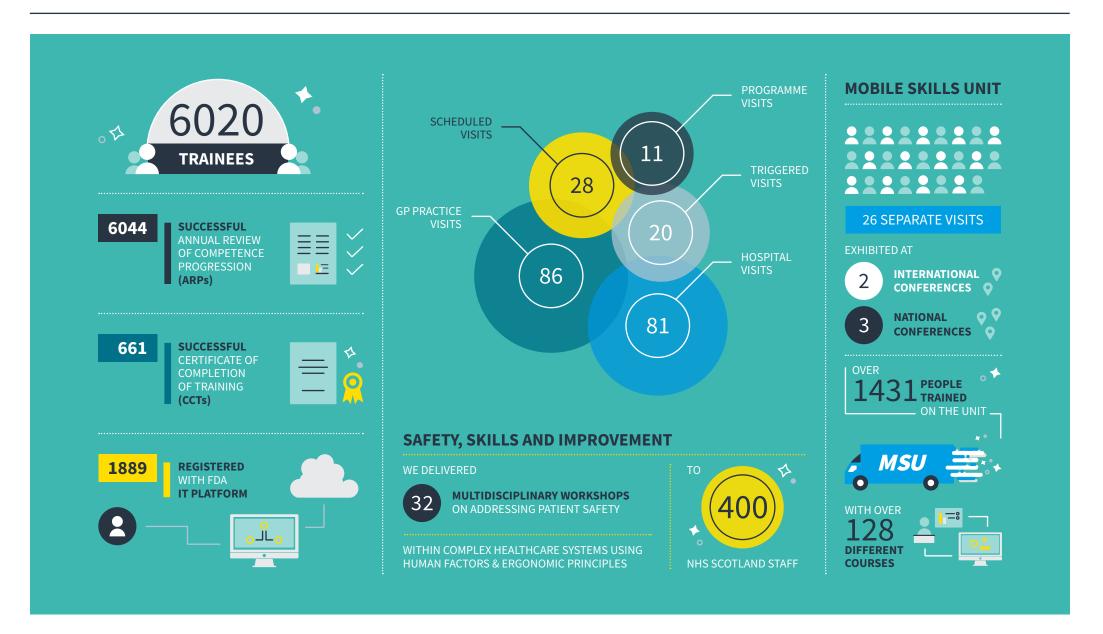
Our overarching aim is to deliver first-class medical education and training for Scotland to ensure safe, effective care for patients, both now and in the future.

Working with all our partners, we aim to achieve this by:

- Organising and providing excellent training programmes that attract high quality doctors to Scotland.
- Meeting and exceeding all regulatory standards through consistent application of best practice and the principles of continual improvement.
- Supporting the ongoing educational and training of Scotland's trained doctors, together with those who support their work.



Highlights



Foreword

Welcome

Welcome to the 2020 Annual Report and our look back over the training year. Again, we seek to report on our activity and achievements to demonstrate our key role in the recruitment, educating and training of Scotland's 6000 or so trainee doctors. Set out under the themes of Training our Doctors, Meeting Standards and Supporting Scotland's Doctors we hope to give you an appreciation of our work and the contribution we make to the NHS in Scotland.

To improve our on-going management of training programmes, we have now completely aligned all our processes, nationally across specialty groupings rather than regionally, with single core functions provided on a central basis. The new arrangements have bedded in well and trainees are now a beginning to realise a range of benefits such as increased equity, improved standardisation and robust quality assurance, through more precise calibration.

Quality management of education and training remains a priority and we report a great deal of activity and partnership working in this vital area. In conjunction with Scotland's Health Board Directors of Medical Education (DMEs), and the General Medical Council (GMC) we have addressed variations across Scotland and worked towards improvement. Over the course of the year we have undertaken 81 panel visits to hospital departments, 86 visits to General Practitioner surgeries and issued 212 good practice letters to units and departments who have excelled in delivering education

and training. In addition, we continue to work with the GMC around their Enhanced Monitoring process and can report that the number of training sites being supported through Enhanced Monitoring has reduced by 2 from 9 to 7.

We are also now preparing to implement GMC's new Quality Assurance process and making sure that we contine to fulfil our statutory obligations to the GMC, on behalf of the NES Board.

More widely, we continue to invest in Scotland's doctors, by supporting knowledge and skills across a broad range of areas and support functions. Our intention is to build faculty and help make sure Scotland's trainers have the necessary skills and expertise to impart excellent training. These efforts range from generic teaching skills to bespoke modules for specific purposes and we pleased to feature much of this work in the report.

We are absolutely committed to safe and effective care of patients, both now and in the future, and our dedicated teams will continue to make sure this happens, and I commend the 2020 Annual Report to you as a summary of their important work.

Prof. Rowan Parks
Acting Medical Director

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Training our Doctors

4.1 Highlights

Speciality Training Boards

Anaesthesia, Intensive Care, Emergency Medicines

615

577

65

Obstetrics & Gynaecology, Paediatrics

Diagnostics

280

221

40

Medicine

Medicine

The Scottish Foundation School

1692

1586

N/A

Mental Health Specialities

279

408

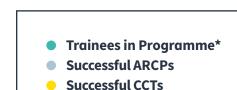
437

507

48

Mental Health Specialities

922



General Practice, Public Health

Medicine, Occupational Medicine

Totals

Surgery



^{*6020} Trainee Establishment

4.2 Overview

During 2019–20 the Deanery's training management team has undertaken a major project changing how we work.

The Training Management Vision Project took forward the work of the Medical Vision which brought the four Scottish Deaneries together as one single Deanery in 2014. This aligns the Training Management processes with the Quality Framework in working nationally across specialty groupings rather than with a regional focus.

This project, involved our teams reviewing all our processes, amending and cleaning data and working on ensuring their programme information was up to date. After that, we had an extended period of handover, with staff crisscrossing Scotland visiting the five NES offices, and getting an understanding of their new programmes. All our administrative staff, our Training Programme Directors and Associate Deans/Associate GP Directors were involved in managing this change, as well as Trainee Doctor representatives. This change went live on 1 Nov 2019.

At the same time, we continued to build on the use of single and national processes for core training management functions:

- + ARCPs (Annual Review of Competence Progression)
- + ARCP Appeals
- + LTFT (Less Than Full Time) applications
- + IDT/IRT (Inter-deanery transfers/Inter-regional transfers)
- + OOP (Out of Programme) applications
- + Study Leave

09 / 50

The new arrangements allow further cross-regional/national ARCPs which provide streamlined and efficient review of trainee progress within a specialty across the whole of Scotland.

The benefits are many:

- + Transparent process equitable experience for all trainees
- Expert ARCP panels drawing on experience from up to four regional programmes
- + Opportunities for quality assurance and calibration
- + Cost-effective and efficient:
 - excellent use of staff time
 - reduced requirement for multiple College externals
 - reduced requirement for multiple Lay representatives

Study Leave for all postgraduate trainees is delivered by a small national team in conjunction with our programme directors.

Our administrative teams now link with a Lead Dean/Director, and with their Specialty Training Board to work cohesively around matters relating to recruitment, progression, curriculum development etc.

Underpinning the work of the administrative teams is the NES Turas platform, in particular the Training Programme Management (TPM) module. In the last year we have updated study leave function and improved links to Oriel, the UK recruitment system for doctors in training. Latterly we have updated and improved the functionality for Recognition of Trainers in line with GMC standards.

TPM allows for the management of programmes, trainees, locations and trainers so that trainees are in the correct programme, are placed in approved locations and supervised by recognised/approved trainers. We are also developing online Less than Full Time application form to streamline this process for trainees, Health Board colleagues and supervisors.

The strength of the Turas platform is that TPM can work with Turas People, the HR module supporting the new employment arrangements and Turas Portfolio and Learn, allowing learning to be recorded and seamlessly updated for Scottish Foundation trainees.

The four devolved nations work together to recruit junior doctors on a national basis using a single online system called Oriel. Work took place throughout 2019 to commission a new updated version of this platform working across the four devolved nations. Oriel 2 is now in deployment with phase 1 due to commence in May 2020.

This year we again participated fully in UK recruitment, working with lead recruiting bodies across the UK to provide assessment centres and panellists and in supporting the management of applications. For the first time, NES has led on the delivery of recruitment and assessment centres, freeing the majority of other Health Boards from this workload and providing a consistent, cost effective process for venue sourcing and management of these centres.

In 2019 we advertised 848 Foundation year one places and filled 841 (99%) and advertised 326 core & 805 specialty posts and filled 301 (96%) and 742 (98%) respectively.

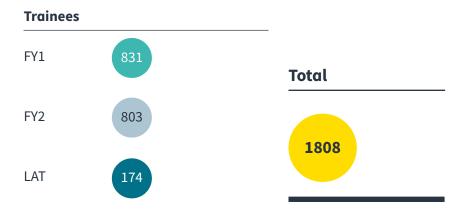
Our priority is the assurance that our trainees are progressing as expected and continue to train and work safely for themselves and most importantly for patients.

We oversaw 7688 Annual Review of Competency and Progression reviews, as some doctors have dual specialties and require more than one review. 488 doctors did not have a review because they were out of programme, on parental or sick leave. 7247 (94%) of the reviews were positive or neutral, with a small proportion of trainees requiring additional time or support to continue training.

For the training year 2018–19, 248 completed their training in General Practice and 413 completed training in other specialties.

Trainees		Total
GP	248	
Specialty	413	661

For foundation training, 831 FY1 completed the year and were put forward for full GMC registration. 803 completed FY2 and were then able to progress to specialty training.



In addition, a number of doctors left before completion of training. The majority of these resigned from training (88) or were released from training (25) due to lack of progression. 12 doctors transferred out of Scotland to Deaneries elsewhere in the UK.

4.3 Looking ahead

Since November 2019 we continue to build on how we deliver our services to trainees and trainers. All TPM activity has moved from a regional model to a single deanery model aligned to Specialty Training Boards. Our Postgraduate Deans and GP Directors are responsible for all trainees within a specialty group across Scotland. Sessional medical staff have also been aligned to their respective Dean/Director.

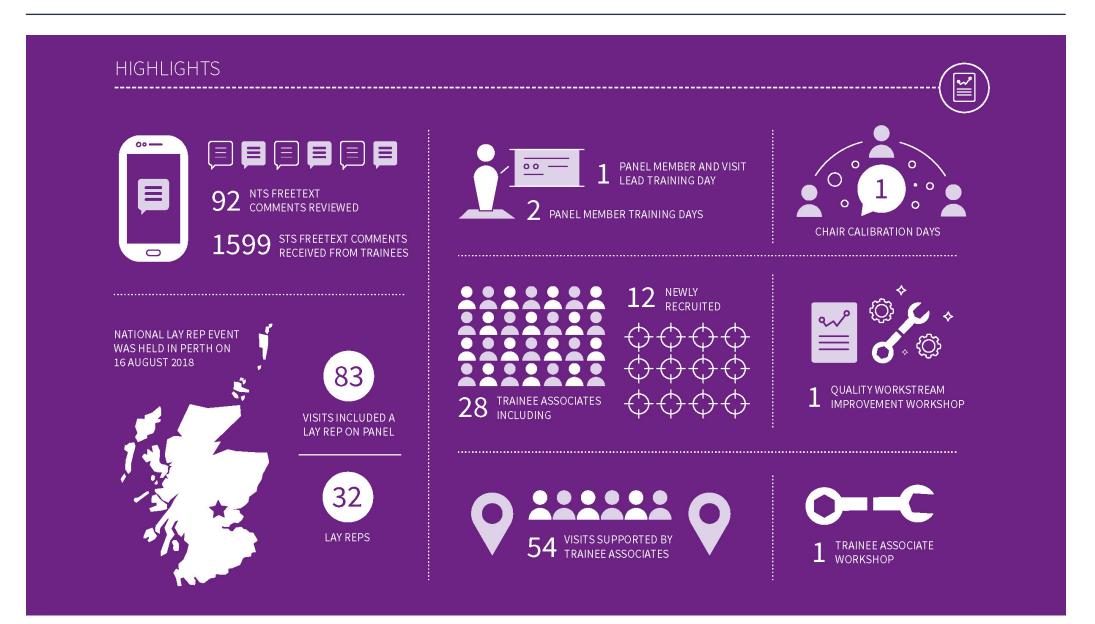
We will see further developments in Turas functionality with improved reporting allowing us to monitor movement of trainee numbers better, and the development of a quality module to automate and allow us to manipulate data for interpretation in a consistent and easy to understand way.

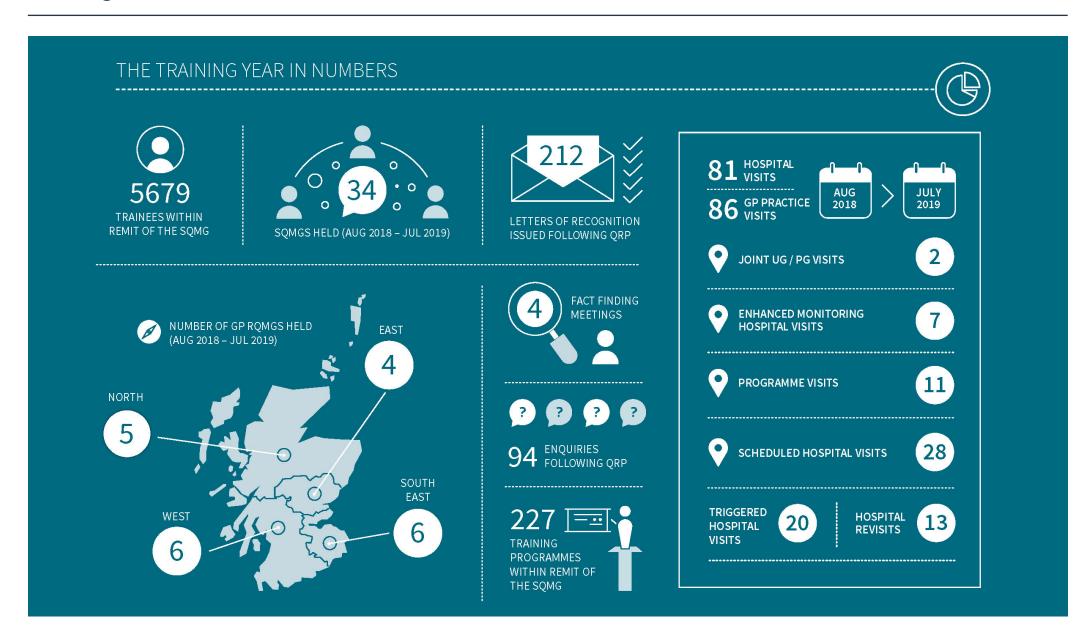
The implementation of the changes to how training is delivered in the UK, agreed by the four nations in 2016, will continue. Improving Surgical Training (IST) will conclude its pilot phase and we will see the first trainees starting in the Improving Medical Training (IMT) pilot.

The development of post training credentials will be beginning next year, and we will be working with colleagues in Professional Development and the GMC to support the management of delivery of this new way of training.

Turas People will assist in making the trainee employment journey more straightforward and provides a central place for trainees to access, receive and store employment related information.

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5.2 Overview

Working with partners in Health Boards our work to drive forward improvements in medical education and training are ongoing, with many activities and interventions having taken place over the course of the year. This included 81 panel visits to hospital departments, 94 follow-up enquiries 86 visits to General Practitioner surgeries. And very pleasingly we issued 212 good practice letters to units and departments who had excelled in delivering education and training to the required standards.

Our pan-Scotland approach to Quality Management is now well established and the in-depth knowledge our teams have built up is now reflected across each of the 8 specialty areas covered. Working jointly with Directors of Medical Education, in Health Board and with GP Practices, we continually monitor and analyse the delivery of medical education in the learning environment.

We continue to work with the GMC around their Enhanced Monitoring process and can report that the number of training sites being supported through Enhanced Monitoring has reduced by 2 from 9 to 7. As in previous years, our contribution to the Sharing Intelligence for Health and Social Care Group has also helped early identification of systems that may be becoming under pressure and allowed action to be taken. Underscoring the clear link between high quality medical training and safe effective patient care. The overarching Taskforce to Improve the Quality of Medical Education maintains its work to effect wider change and tackle system-wide issues that span the remits of the Deanery, universities and Scotland's Health Boards.

We continue to develop our quality system and over the course of the year we have further refined our policies and invested further in team training: to ensure greater consistent and quality across our outputs.

Our system is in rude health but now needs to adapt and change to the challenge GMCs new Quality Assurance system being introduced in the first half of 2020. Work is now underway.

Medical Additional Costs of Teaching (ACT)

The management of Additional Costs of Teaching (ACT) for undergraduate medical students within NHS Scotland continues to be a key responsibility for NHS Education for Scotland (NES).

Medical ACT is supported by an annual budget of approximately £80 million which is fully distributed each year by NES via the Medical ACT allocation model to the Health Boards in Scotland to allow them to meet the additional costs of teaching medical students within the NHS.

The NES Medical ACT team continues to work with groups within the Medical ACT infrastructure including Regional ACT Groups, representative from Medical Programmes, Directors of Medical Education and Finance at Board level and ACT Officers to improve the quality of undergraduate teaching within NHS Scotland. Key activities also include review of hospital and GP teaching activity to ensure Medical ACT funding remains responsive to changing curricula and Scottish Government medical workforce policies. The NES Medical ACT Governance Group (MAGG) oversees the management of the Medical ACT model and the distribution of funding to ensure that Medical ACT funding delivers value for money.

The introduction of an ACT levy for non-EEA students by the Scottish Government commenced in August 2016. Prior to the introduction of the levy, only Scottish Funding Council funded students were included in the allocation process despite all students being taught in NHS locations. Following commencement of the levy, all students (SFC confirmed numbers + overseas non-EEA students) are included in the allocation process. The additional funds generated by the levy are currently used to deliver the Medical Education Package:

- + A 'widening access' initiative aimed to assist more students from deprived backgrounds to enter the medical profession (commenced in August 2016)
- + A pre-medical entry programme is aimed at providing students with the experience and qualifications required to meet entry level requirements to study medicine at university (commenced in August 2017)
- + The Scottish Graduate Entry Medicine (ScotGEM) programme is a four-year graduate entry medical programme with a focus on rural medicine and healthcare to support the recruitment and retention of doctors in these areas. The programme commenced in autumn 2018 and is jointly managed between St Andrews and Dundee Universities
- + A 'return of service' bursary is available to all ScotGEM students across all 4 years of their training

Health Boards continue to report annually to NES on their use of ACT funding, the distribution of ACT funding to directorate budgets and the number of ACT funded sessions in job plans. These accountability reports allow for a comparison of the local distribution of funding with the teaching activity identified through the measurement of teaching (MoT) data. This process significantly improves transparency and helps NES to provide assurance around value for money.

In early 2019, the NES Medical ACT team, led a review of ACT funding within Primary Care from which recommendations were fed into a wider national review of the approach to delivering undergraduate teaching in Primary Care in Scotland. The review was conducted in response to Scottish Government's vision of increasing the number of primary care and remote and rural placements in all Medical Schools. A key component of this was a review of teaching activities involving GP/primary care across all medical programmes in Scotland to gain understanding of the associated costs in all Health Boards. The remit was to inform the development of a consistent approach to measuring and resourcing undergraduate teaching in Primary Care through Medical ACT.

Following recommendations from the NES Primary Care ACT Review group and the Increasing Undergraduate Education in Primary Care group, Scottish Government have agreed to provide additional funding to enable the category A tariff for clinical teaching in Primary Care to increase from £40 to £85 per session, which will be implemented during the academic year 2020–21.

A further review is planned to attempt to streamline the current range of category B tariffs in Primary Care ACT and will be led by the NES Medical ACT team, in collaboration with relevant stakeholders. This is anticipated to commence in Spring 2020.

5.3 Looking ahead

Over the course of 2020 the GMC will introduce its new approach to Quality Assurance of medical education, and we are now adjusting our own internal system to best work alongside the new GMC arrangements.

We will now re-declare that we meet the standards of the GMC's Promoting Excellence and be frank about whether we have serious concerns about our ability to meet the standards with possibility that re-declaration may be deferred if deficiencies are present.

In doing so, we will be required to review all available data and intelligence and complete a detailed self-assessment questionnaire. All of which in turn will be reviewed by the GMC, as part of a wider triangulation and gap analysis exercise, that will determine the GMCs quality activity in Scotland over the following year — intended to seek assurance or to confirm evidence of excellence, innovation or notable practice. This might include document requests, meetings, shadowing, observations, visits and document reviews. Where the GMC are not assured, they may undertake further activity and ask the us to provide a response.

All the above will be detailed each year in the GMCs annual quality summary for Scotland.

In line with the drive to deliver more training and education in primary care we aim to enhance and improve the quality management support we provide in this increasingly important area of practice. In practice we now plan to improve the consistency of our quality management processes and further engage with out of hours services. We will introduce a Standard Operating Procedure for GP practice quality management visits and establish a requirement bank for practice approvals. Alongside this, we hope to establish inter-regional visiting to GP practices and better calibrate our team's interpretation of the standards being worked to. A new suite of Work Placed Based Assessments will be introduced in August 2020. This will significantly alter those undertaken in secondary care for GP Trainees. Advance planning on how this will be communicated to trainers in secondary care will require consideration.

In anticipation of new facilities opening in Edinburgh we plan to the visit the trainees in Emergency Medicine and Anaesthetics, shortly after opening to check training standards are maintained. Similarly, we intend to Radiology and possibly assess how the new environments are for trainees in Virology, Diagnostic Neuropathology and Paediatrics Perinatal Histopathology.

More widely we recognise that the challenges of providing excellent training in busy service environments seem to get greater year on year. However, our experience of recognising and responding to these challenges is increasing along with our partners in the Health Boards.

Together we strive for fair training for all our doctors in training and for higher quality of training where that falls short of what is expected through the GMC's standards. Our aspiration is that all doctors training in medicine training environments in Scotland have the best possible experience training to ensure the want to stay in Scotland after completion of their training and provide safe and high-quality care to our patients for the future.

5.4 Case Study: Demystifying the Deanery Quality Management Visit

Euan Harris Scottish Clinical Leadership Fellow 2018–19 (hosted by the Quality Workstream) & Quality Management Trainee Associate

During the last year, whilst undertaking the Scottish Clinical Leadership Fellowship Programme hosted by the NHS Education for Scotland Quality Workstream, I have been working closely with the Quality Management Improvement Group. Recognising that there remains some uncertainty and misperception surrounding the purpose of Quality Management Visits, which can cause a degree of apprehension amongst trainees when they are invited to attend, the Quality Management Improvement Group have been exploring ways to better engage with trainees and trainers. This has involved ensuring participants have a more detailed understanding of the visit process, as well as greater awareness of how data and intelligence is collected and used. Most significantly, the Group wanted to stress that the purpose of Quality Management Visits was communicated to trainees, namely, to provide a supportive and confidential environment for them to discuss their experience of medical education and training.

To help address this, a new dedicated Quality Management Visit section within the Trainee Information webpages on the Scotland Deanery website was developed, with the aim of outlining to trainees what to expect on a visit if asked to attend.

The content describes the timeline of a Quality Management Visit, explaining what happens before, during and after a visit. It highlights several key elements including the Pre-Visit Teleconference, the importance placed on the Pre-Visit Questionnaire, the structure of the Question Sets, how the visit report is written and where to access the report subsequently. A further aspect orientates trainees to the visit panel, explaining the individual roles and responsibilities of those taking part, as well as detailing why and how sites are selected to be visited.

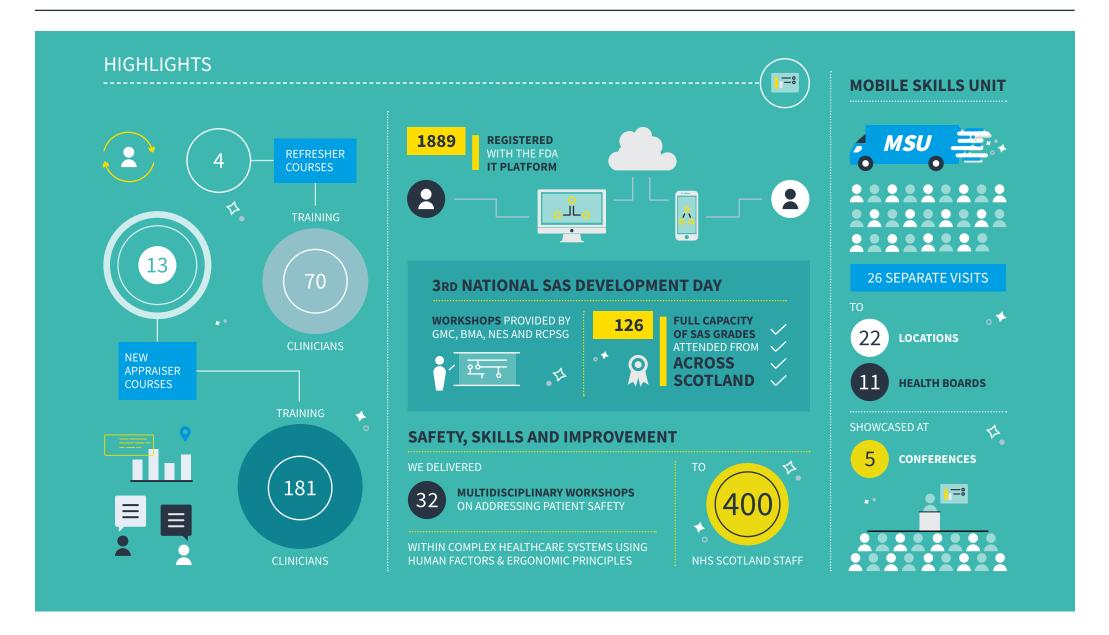
To compliment this information, in May 2019 a contingent of burgeoning thespians made up of trainees, trainers and many of the NHS Education for Scotland Quality Team came together to film a series of short instructive videos documenting a mock Quality Management Visit. Whilst the Royal Shakespeare Company can count themselves safe, through the course of filming a variety of scenarios we definitely discovered some hidden talents! We trust the videos accurately illustrate so many of the stories that panels often hear from trainees and trainers when conducting visits and provide an honest account of the visit process. A special message of thanks needs to go to the NHS Education for Scotland Digital Team who kindly (and patiently) helped film throughout the day.

The unifying theme throughout all of the material is a desire to stress the opportunity Quality Management visits present for trainees to engage constructively in influencing and developing their own training, by highlighting what is working well, and what could be improved. We also wish to recognise the need to assist and support trainers in continuing to provide high quality, excellent training.

The Quality Management Improvement Group hope that the new webpages, and notably some outstanding acting talent, offers an entertaining insight into the Quality Management visit process, and reflects the commitment of NHS Education for Scotland in promoting an understanding and supportive environment in which the challenges faced by trainees and trainers can be discussed, as well as offering a means to share best practice, and ultimately advance postgraduate medical education and training in Scotland.

For further information please find the link to the Quality Management Trainee Information webpages here: https://www.scotlanddeanery.nhs.scot/quality/

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6.2 Overview

To maintain high levels of healthcare provision and patient safety it is important that training is a continuous activity for healthcare professionals within the NHS. To achieve this the NES Medical Directorate Professional Development workstream exists to develop and deliver a range of uni-professional and multi-professional activities in support of doctors in training, their trainers, and the wider trained healthcare workforce.

Training has been designed so it can be delivered within a range of settings wherever needed throughout Scotland. The development of remotely accessed flexible training allows NES to offer training which covers most NHS staff, allowing the balance to be struck between a highly skilled workforce with minimal time out of the workplace.

6.3 Faculty Development Support Unit (FDSU)

We continue to deliver a range of educational resources to support the initial and ongoing development of trainers.

- + In 2019 we delivered 7 one-day Advanced Medical Educator Courses for experienced Educational Supervisors with more than 5 years' experience in an educational role.
- + We have also delivered pre-CCT Trainer workshops to trainees in their final year for Specialty Training with the aim of them being 'trainer-ready' when appointed to a Consultant role.
- + Collaborative work with the Medical Schools and Health Board DMEs has resulted in the introduction of new processes for initial and ongoing Recognition of Trainers. This new, single system approach, utilises existing IT systems and is based on agreed criteria which apply to each of the four named roles.
- + The Approved Medical Practitioner Training Programme consists of initial training, which is delivered in 2 parts: Part 1 an online module followed by, Part 2 a face-to-face workshop; and Update training for those already in an AMP role. As of December 2019, NES have delivered 12 Part 2 courses and 52 Update Training courses across Scotland.
- + The Faculty Development Alliance has developed and piloted a new Leadership in Training Course which will be rolled out across the country in 2020.
- + We have committed to working towards providing places on the trainee LaMP programme for at least 80% of the average number of CCTs per year.

6.4 Leadership & Management Training

- + Updated materials have been introduced into the LaMP programme and the materials have also been piloted with a Multi-professional audience.
- + An evaluation of the Scottish Clinical Leadership Fellowship has been accepted for, and is pending publication in the publication BMJ Leader.

6.5 Faculty Development (Train the Trainers)

- + We deliver a Trainer's Workshop as an 'entry-level' train the trainers course for all trainers to support the GMC's Trainer recognition requirements, and to support GMC approval for GP trainers; the Scottish Prospective Educational Supervisor's Course, Approved and Experienced Educational Supervisor Workshops.
- + We continue to deliver a Supporting Trainees with Difficulties Course.
- + A new one-day Leadership in Training course has been piloted and will be rolled out across Scotland in 2020.

6.6 Quality Improvement

Scottish Quality Safety Fellowship

In September 2019, the 12th Cohort of the Scottish Quality and Safety Fellowship (SQSF) commenced. The Fellowship supports healthcare staff to develop leadership skills and how to improve the delivery of safe patient care. We are now proud to have over 290 Fellows each playing their part in stronger clinical leadership across NHS Scotland and beyond. The Fellowship has reached 9 different countries including Norway, Denmark, Canada, New Zealand, England, Wales, Ireland and Northern Ireland.

Scottish Improvement Leader Programme

November 2019 hosted the annual Scottish Improvement Leader (ScIL) networking event in Scotland marking the graduation for our latest Scottish Improvement Leaders. 119 participants graduated from across public services and showcased their learning and improvement projects. We also hosted the first ScIL networking event in Northern Ireland that saw a further 45 participants graduate from Health and Social Care across Northern Ireland. To date we have trained 508 Improvement Leaders with over a further 200 participants undertaking the training in Scotland and Northern Ireland at the time of reporting. 4 cohorts of the programme are delivered each year in Scotland.

Scottish Coaching & Leading for Improvement Programme

This programme was established in 2018 for a target audience of managers. It enables managers to develop leadership skills, gain knowledge and confidence in the core components of quality improvement whilst embedding a coaching approach to how teams are enabled and empowered. Four cohorts of the programme were commissioned by the Chief Nursing Officer over 2019/2020 in line with the Excellence in Care programme of work, with 77 managers completing the programme.

Over the past year this programme has adopted a partnership model to allow local delivery in Boards, with national faculty supporting local faculty to deliver the course. Boards who have engaged with this approach to date include NHS Grampian, NHS Greater Glasgow & Clyde, NHS Dumfries & Galloway and NHS Education for Scotland. The programme has also been commissioned for external delivery to the Western and Southern Health and Social Care Trusts in Northern Ireland.

Scottish Improvement Foundation Skills Programme

This programme aims to develop individuals' skills, knowledge and confidence to be active team members contributing to the improvement of local services. Over 2019–20 80 staff from across the Public Sector completed the programme, made up of seven virtual 90-minute sessions using the GoToTraining platform.

In line with NES organisational priorities to increase its own workforce capability to use quality improvement as a method to implement change, a total of 42 staff have completed the programme over 2019–20.

To build further QI capacity across Scotland, over the last quarter of 2019–20, a set of accessible resources and shadowing opportunities were developed to allow graduates of SQSF and ScIL to deliver the programme to individuals within their own organisations. 92 staff have so far requested access to these resources to support delivery in their own areas.

Quality Improvement Zone & Suite of eLearning Modules

The QI Zone on Turas Learn, is being exceptionally well received, to the extent that requests are being received from international partners to secure their own space on Turas Learn and replicate content to share with staff from their own organisations. It houses a suite of 5 introductory eLearning modules which follow the now established Scottish Improvement journey.

Analytic data is showing the following numbers for completion for modules:

- + Understanding your system 1,360 complete (208 in progress)
- + Developing your aims and change ideas 1,013 complete (97 in progress)
- + Testing your change ideas 924 complete (69 in progress)
- + Implementation and Spread 540 complete (59 in progress)
- + Measurement for Improvement 1, 370 complete (810 in progress)

Realistic Medicine

2019 saw the launch of the Turas Learn Realistic Medicine website, providing information and resources aligned to the educational strategy for the programme of work. A significant part of this was the development and publication of the Shared Decision-Making eLearning module. Analytics to date show that in a 2 month period 418 staff have completed the module, whilst 517 staff are in progress to complete the module.

Value Management Collaborative

NES have the lead role on development of educational resources, provision of coaching and training for the Value Management Collaborative. This is a partnership programme of work with Scottish Government (SG) and Healthcare Improvement Scotland (HIS) which focusses the use of quality improvement to improve performance, cost and capacity in microsystems. This work has been progressed with 18 teams across 6 Boards.

Access QI

NES have the lead role on development of educational resources, provision of coaching and training for Access QI. This is another partnership programme of work with SG and HIS which focusses the use of quality improvement to meet the challenge of delivering sustainable improvements in waiting times whilst maintaining or improving the quality of care. Three Boards have been recruited as accelerator sites where educational interventions are currently being tested. These include NHS Lothian, NHS Tayside and NHS Grampian.

Primary Care

2018 saw the launch of a funded opportunity to enable 'First 5' GPs to become involved in CPD activities to help develop their skills, knowledge and confidence in quality improvement and become an active part in supporting positive changes in primary care delivery. This was provided through participation on the virtual Scottish Improvement Foundation Skills (SIFS) programme. Over 2019–20 programme access was extended to include staff from across all primary care. 83 'First 5' GPs have completed the programme, with 53 staff from primary care doing the same.

Board Development

A dedicated Board Development learning platform on Turas Learn has been created, with sections including relevant education and support material on induction, integration, mentoring and coaching and CPD. The new induction approach combines local and national induction with new appraisal arrangements for Non-executive Board Members. A mentoring scheme for Non-Executive Board Members and Chairs was launched in August 2019, with 10 mentoring partnerships now underway.

6.7 General Practice Returner & Enhanced Induction Programmes

The GP Returner and Enhanced Induction programmes continue to generate interest with ongoing support provided by NES from initial enquiry through to scheme completion.

- + Over 2019, 4 GP Returners have completed, 2 are currently in post with 4 more expected to join the scheme.
- + Three EI doctors are currently in post with another two currently undertaking national assessments.
- + RCGP/GMC Streamlined CEGPR processes are now in place and we have received one application from an Australian trained GP.
- + A social media campaign to publicise the GP Returner scheme in Scotland ran successfully in early 2019.

Looking ahead

Following extensive mapping by the RCGP of other GP Qualifications against the UK curriculum, we are able to support applicants from Australia, New Zealand, South Africa and Canada to the Enhanced Induction programme through the streamlined CEGPR application process. We are exploring the possibility of an e-portfolio to make gathering of the required evidence more straightforward.

6.8 GP Fellowships

- + We recruited to 3 GP Health Inequality Fellowships, four Medical Education Fellowships and 6 GP Rural Fellowships.
- + The GP Rural Fellowships are co-funded between NES and participating Health Boards and published evidence confirms an important recruitment and retention impact on rural practice in Scotland.

Looking ahead

The Rural Fellowships provide an important test bed for the development of a rural medical credential, which has been highlighted as one of the prioritised areas for progress in the GMC's proposals for the development of regulated credentials. A proposal for a Rural Emergency Practitioner credential, developed from the acute care GP Rural Fellowship has been developed and is ready to be developed further once plans for implementation of regulated credentials are in place.

6.9 Scottish Clinical Leadership Fellowship (SCLF)

We recruit to and employ up to 12 SCLFs; medical and dental specialty trainees that spend a year out of programme hosted in a variety of organisations including the Scottish Government, Royal Colleges, General Medical Council, and territorial and national Health Boards. SCLFs contribute to and lead strategic work in their host organisations. NES provides a bespoke leadership and development programme for the fellows together with Pharmacy leadership fellows in this well-evaluated and flagship leadership fellowship. Now in its tenth year, the SCLF scheme plays a major part in a shared ambition between the Government and the service to identify, develop and nurture a cadre of skilled future clinical leaders.

6.10 Forensic Medical Examiner (FME) Training

- + We deliver a suite of courses to support the training and education of FMEs including 'An Introduction to Forensic Medicine Examination' course, an 'Up-date Conference for FMEs and an 'Essentials in Sexual Offences Management & Court Skills' course. (full title 'Essentials in Sexual Offences Examination and Clinical Management (Adults and Adolescents)
- + We have as part of the Workforce and Training subgroup of the Taskforce to Improve Services for Rape and Sexual Assault Victims, been commissioned by the Scottish Government to redesign our approach to supporting the development of Sexual Offences Examiners. As a result, we have substantially reworked our 'Essentials' course, to provide a blended learning experience and make it more flexible, portal and accessible
- The redesigned 'Essentials' course has been accredited by the Faculty of Legal and Forensic Medicine and as such attendance at this course means that examiners meet the training standards described by HIS
- + We have delivered 'Essentials' courses in a variety of locations. We have also adapted the course at the Government's request to include the nurses that support examiners and clients and are contributing to work that will hopefully result in nurses being able to take on the examiner role in time.

6.11 GMC Credential in Rural & Remote Health

We have led the early development of this new credential, which seeks to address patient safety needs, service requirements and the professional development of doctors working in Rural and Remote contexts across the UK. We will make a formal submission to the GMC in Quarter 2, 2020.

6.12 Medical Appraisal & Revalidation

Training Courses

- + We are mandated by Scottish Government as sole provider of appraiser training for clinicians requiring appraisal and revalidation in Scotland. Appraisals can only be conducted by a NES-trained appraiser to ensure consistency in approach and quality.
- + We currently offer two types of Appraiser training courses a two-day course which is mandatory for anyone wishing to become a New Appraiser; and a one-day Refresher course for experienced appraisers.
- + The Refresher courses are designed to support the existing appraiser workforce by offering them a platform to share good practices, network, and refresh/maintain their skills as an appraiser. It is strongly recommended that experienced appraisers attend a Refresher course every five years.
- + The appraisal year runs from April to March and in the 2018–19 period, we organised 11 New Appraiser courses and 7 Refresher courses.
- + From the 7 New Appraiser courses ran so far (at time of writing), 71 clinicians were successfully trained as New Appraisers; and 53 Appraisers successfully attended 5 completed Refresher courses (1 Refresher was cancelled due to low uptake).
- + Additionally, 4 Dental New Appraiser courses were run in the same period, training 27 new Dental Appraisers.

From the 4 remaining New Appraiser courses, we are projecting an additional 53 New Appraisers to be trained. The last Refresher of the 2018–19 programme is expected to be run with 15 Appraisers attending.

We also ran a 1-day Appraiser Course Tutors day, and successfully trained up 12 new course tutors to join the existing tutor panel. Full details and breakdown of the training courses will be available in the Medical Appraisal Scotland annual report later in the year (due in end of July 2019).

Conferences and other National meetings

In addition to the Appraiser Training courses, NES supports the Appraisal and Revalidation process in Scotland by organising the annual Scottish Medical Appraisers Conference (as part of SMEC). This year's theme was "Taking Appraisal Forward", and took place on 26th and 27th April 2018 at the EICC. It was very well attended with positive feedback on the workshops.

An Appraiser Course Tutors Conference was also held on 24th October 2018, attended by the majority of the tutor panel. The day included a presentation from Dr Rob Hendry from the Medical Protection Society, and an experiential workshop.

We also facilitated two National Appraisal Leads, and two National Appraisal Administration meetings to support all the Appraisal Leads and Local Admin teams within the health boards, giving them a platform to discuss and inform on significant issues and share best practice.

SOAR

Scottish Online Appraisal Resource (SOAR) is the centralised online system used in Scotland for managing the Medical Appraisal process. SOAR has been running since 2005 and is used by all doctors working in NHS Scotland. The system is developed and maintained by NES, but the data on SOAR is maintained by users and local health board admin teams to facilitate the appraisal process.

Following the conclusion of the first Revalidation cycle, the focus of development has moved to improving the system infrastructure, and developing features stemming from user feedback. A history of SOAR's development deployment is available on the Medical Appraisal Scotland website: http://www.appraisal.nes.scot.nhs.uk/help-me-with/soar/about-soar/deployhistory.aspx

SOAR users are supported via a helpdesk system managed by the Medical Appraisal Scotland team.

Medical Appraisal & Revalidation QA Report

As we enter the second cycle of Medical Revalidation, NES was asked by the Scottish Government to take over the responsibilities for the Medical Appraisal & Revalidation Quality Assurance (MARQA) report, previously produced by NHS Health Improvement Scotland. The initial data is collated via SOAR and sent to the health boards for cross-checking local data.

The finalised report was published and circulated on 3rd December 2018. The report is available on the Medical Appraisal Scotland website: http://www.appraisal.nes.scot.nhs.uk/i-want-access-to/marqa.aspx

New Appointments

In addition to the activities above, 2018–19 has been a year of change for the Medical Appraisal Scotland team in NES.

Following Harry Peat's move to the NES Dental team, **William Liu** has taken over the role of Training Manager (Medical Appraisal) from mid-October 2018. Prior to his move to NES Digital, William was previously the team's Information Manager from December 2006 until February 2017. William will continue to have overall responsibility for SOAR (Scottish Online Appraisal Resource), in addition to the new responsibilities for managing the Appraiser training programme.

Following Dr Niall Cameron's retirement from NES, **Dr Christiane Shrimpton** has been appointed to take up the role of Associate

Postgraduate Dean for Appraisal and Revalidation (National

Appraisal Advisor). Dr Shrimpton is an Associate Medical Director in

Dumfries & Galloway and her specialty is Ophthalmology. She was

more recently the Clinical Appraisal Lead in University Hospitals of

Morecambe Bay NHS Foundation Trust where she was responsible

for the improvement of appraisal processes and training.

Looking ahead

2019–20 second (five-year) GMC Medical Revalidation cycle. Collectively there has been a lot of valuable lessons learnt between all the stakeholders. A lot has been achieved, and a lot of work is still to be accomplished and explored.

The full 2019–20 Appraiser training programme has been published; the first MARQA report of the second Revalidation cycle is in the planning stage; Conferences and National meetings have been scheduled; and significant development on SOAR is expected.

A small taste of things to come as we usher in a new chapter for Medical Appraisal in Scotland.

6.13 The Specialist and Associate Specialist (SAS) Development Programme

- + This programme, now established for 7 years, continues to build on its early successes. There is an experienced team in place raising the profile of SAS nationally, and with representation in each of the Health Board areas also raising the SAS profile locally.
- + The fourth National SAS Conference was held in March 2019 in RCSEd. This included a host of interactive workshops provided by organisations including the GMC and BMA, and was attended by a full capacity of SAS grades (136) from across Scotland. Of the feedback received, 100% would attend a future conference, and 100% would recommend the event to SAS colleagues. The 5th National SAS Conference is scheduled for March 2020, at which 150 SAS grades are due to attend.
- + A series of 9 local SAS educational events were hosted across various health boards organised by the local SAS Education Advisers. A total of 172 SAS attended these events, with 43 more booked to attend the NHS Lothian local day at the end of January.
- + 42 applications were made to the SAS Development Fund, supported by local SAS Education Advisers, of which 98% of applications were approved. Examples of training which deliver new or improved services in the various Health boards including: Diploma in Conscious Sedation for Dentists, Ultrasound training course, and Mentalisation Based Treatment (MBT) training courses with subsequent Eye Movement Desensitisation & Reprocessing supervision, all improving access to care and improving the safe, effective service to patients in keeping with Scottish Government's 2020 Vision.

- + We ran 3 workshops to support SAS doctors considering applying for CESR, run jointly with GMC with 40 attendees overall. We supported 7 SAS in their progress towards CESR; individuals with clearly identified gaps in training were funded to undertake either supervised secondments or training which should enable them to achieve the competencies they require towards making a successful CESR application.
- + The SAS Programme delivered bespoke courses for SAS; 27 individuals attended a jointly run GMC SAS course on Professionalism and Introduction to Leadership; 40 attended a jointly run GMC SAS workshop on CESR; 52 SAS attended Quality Improvement training, led by the NES QI team.
- + 23 SAS have attended the initial workshop in Leadership and Management with the date for the second workshop scheduled in 2020; a further 22 SAS doctors and dentists have completed the training programme over this year
- + We have further developed our resources to support SAS new to the grade. As well as improving our own online resources, we have developed a guide to be issued to all new SAS grade doctors and dentists starting in Scotland's NHS, to provide further information on SAS contracts, Appraisal, Job Planning, CESR, SAS programme funding, as well as links to our online resources.
- + The SAS Programme Lead/APGD is working with colleagues nationally to explore issues affecting SAS, with the aim of identifying ways of best working together to address these.

Looking ahead

- Generic SAS learning needs are being addressed with tailored training courses being developed and scheduled, in response to highlighted training needs.
- + The SAS Development Programme continues to receive high quality applications with a current focus from individuals pursuing CESR and requiring top up training, as well as training courses and tailored secondments to learn skills to develop new clinical services. Feedback from recent applicants and their clinical directors confirms the success of the SAS Programme in developing individuals and improving service delivery and patient care.
- + The SAS Development Programme continues to evolve to respond to the changing needs of Scotland's NHS.

6.14 Safety, Skills & Improvement

- + 32 multidisciplinary workshops to 406 NHS Scotland staff addressing patient safety within complex healthcare systems using Human Factors and ergonomic principles.
- + Updated the e-learning module 'Introduction to Human Factors and Ergonomics'.
- + Delivered effective clinical handover education sessions to Foundation Doctors throughout NHS Scotland across nine territorial NHS boards.
- + Delivered pilot effective clinical handover educational sessions to:
 - Community nursing teams
 - General Practitioners
 - Scottish Ambulance service
- + From these pilot events we are developing educational resource to support spread through these professional groups.
- + Delivered a virtual QI educational course to 85 GPs within their first 5 years of qualification and 53 other professionals in primary care teams to upskill their knowledge and application of Quality Improvement in primary care.
- + Adapted foundation level QI course content and used this to deliver QI training at five GP trainer workshops throughout Scotland.
- + NES Human Factors and Patient Safety development work now being embedded in SG's Openness and Learning Agenda.

Looking ahead

- + New e-learning module under construction: How to respond when things go wrong in a complex system.
- + Interactive online education resource under construction Always Events involving patients in QI activities.
- + E-learning resources for sepsis prevention, recognition and treatment for NHS Scotland due to be updated in May 2020.
- + Developing train-the-trainer resource for effective structured handover in primary care.
- + Developing resource and infrastructure to support Quality Improvement training to all GPST1s.
- + NES-led consortium successfully awarded 30K by the Health Foundation's Q Exchange Programme.
- + NES Pilot Testing a 2-Day Residential Masterclass in Human Factors with 30 risk, safety, improvement and complaints advisors across five NHS Boards (March 2020).
- + SKIRC team working on a series of Thought Papers to set out future strategy on a Systems Approach to educational research, development and innovation.
- + March 19th Openness and Learning Conference for 120 delegates across Boards on systems thinking for care teams and organisations.

- + Exploring the development, validation and testing of two selfevaluation tools as part of SG's Openness and Learning Agenda to reduce variation in practices across Boards:
 - Good practice principles of team-based quality reviews
 - Good practice principles for organisational incident reporting and learning systems
- NES-led consortium on educational development for Human Factors integration in health and social care (under SG Openness and Learning Agenda) exploring development and testing of a related education intervention for NHS Board Chairs and Non-Executive directors.
- + E-learning module to enhance knowledge and good practice in team-based quality reviews now in development.
- + Professional guidance on Bowtie Analysis as a prospective method to critically examine organisation system controls guarding against the occurrence of serious risk and safety issues to be published in April 2020.
- + February 2020 Expert Multi-Professional Workshop being held to review, refine and validate NES Safety Culture Discussion Cards.

- + SKIRC, in partnership with NHS Highland, was awarded a £70,000 'Innovating for Improvement' grant by The Health Foundation. The funding will be used to implement and evaluate a novel preparation resource which uses inexpensive virtual reality technologies to allow patients to experience having an MRI prior to their actual scan. In paediatric patients we intend to show the resource can reduce the need for general anaesthetic in MRI, while in adult patients we intend to show how it can decrease the MRI failure rate for claustrophobic patients through improving the scan completion rate and reducing the presence of motion artefact in the image.
- + We have engaged a network of over 200 healthcare leaders, practitioners, educators and researchers to commence national development work in identifying and prioritising service areas where the field of Human Factors/Ergonomics can add value in improving care system performance, patient safety and workforce wellbeing.
- + The establishment of the SKIRC further enhances the international reputation of the Medical Directorate in the fields of Safety, Clinical Skills, Improvement and Human Factors sciences. SKIRC related directorate outputs have strongly influenced healthcare policy and practice in these areas and led to various developments to support undergraduate and postgraduate education, continuing professional development, appraisal in support of medical revalidation and national initiatives to improve the quality and safety of patient care.

Over 60 academic papers are published in international peer review journals to-date, with multiple book chapters and technical reports generated, and numerous national and international conference keynote and workshop presentations given.

In 2019 CSMEN developed more specific and accountable contracts to deliver relevant and timely training for the NHS workforce in areas of **pre-hospital emergency care**, **simulation education and surgical skills**.

We undertook a **Training Needs Analysis** of educators and practitioners. Our results showed a clear recognition of the added value of simulation based education for non-technical skills development (i.e. clinical communication, teamworking, communication with patients and families and decision making). This information has been used to inform the updated **Safety Skills and Improvement Strategy 2019–24** which supports NES' commitment to up-scaling the use of simulation.

Together with our colleagues in Digital we have developed a Communication Strategy to ensure we communicate effectively the benefits of multi-professional simulation training in supporting skills development and patient safety.

Mobile Skills Unit

The Mobile Skills Unit (MSU) had 26 separate visits (including 5 new sites) and was exhibited at 2 international and 3 national conferences. 128 training sessions were delivered on the MSU training 1,431 people.

In conjunction with our training partner BASICS Scotland 11 separate portfolio events for pre-hospital emergency care were undertaken at Nairn, Arran, Shetland, Orkney, Islay, Benbecula, Campbeltown, Lochgilphead, Ullapool, Skye, Inverurie — total trained: 318 (GPs, nurses, SAS).

In conjunction with our training partner the Scottish Centre for Simulation and Clinical Human Factors (SCSCHF) we ran **4 Faculty Development courses** and trained 27 individuals.

- + In conjunction with our partner Dundee Institute of Healthcare Simulation we had two **Minor Surgery Workshops** at Shetland and Campbeltown for GPs and provided surgical experience to high school pupils interested in a career in healthcare.
- + **Pilot of first SUDI Simulation Training Sessions** at Larbert (31 attended) to be rolled out across Scotland, discussions in place for training in Western Isles in 2020.
- + **Engagement with school pupils** Over 400 pupils from local primary and high schools in Lanarkshire took part in suturing, cannulation and got to grips with SimMan.

+ We visited **HM Prisons** in Peterhead and Shotts where staff from the prison, community, MIU and Acute Care at Home teams attended. Training included Deteriorating Patient, Common Emergencies in Primary Care, Scottish Core Obstetric Teaching and Training in Emergencies (SCOTTIE) and Mental Health Team and Drug and Alcohol team training.

Research and Development

To ensure our training is of the highest quality we established a Short Life Working Group for **research into simulation training** with membership from our funded units. In addition we undertook: Plenaries at Montana, USA and SESAM, Glasgow; Two oral presentations and shortlisted for best poster at SESAM and presented posters at International Forum on Quality and Safety in Healthcare Glasgow; Scottish Trauma Network, Edinburgh; Remote and Rural Medical Conference, Inverness

Online Resources

2019 saw the completion of the online resources rebuilds to comply with the new file format and to ensure the functionality in the new Turas Learn platform. Two of the larger resources (Intravenous Medicines Administrations and Safe Communication in Health Care Practice) were converted into Learning programmes ensuring smaller manageable modules for the user to work through.

All the resources are currently being reviewed and updated to ensure they remain current and up-to-date. The reviewers come from territorial health boards and universities.

A new **Ear Care: Assessment and Irrigation** resource was published and was developed in collaboration with NHS Fife, NHS Forth Valley, NHS Greater Glasgow and Clyde, NHS Lothian, NHS Shetland, NHS Tayside, Glasgow Caledonia University and the University of Dundee.

Currently nearing completion is a new **Faculty Development**— **Tier 1** module using the Scottish Faculty Development for
Simulation National Outcomes Framework in collaboration with
NHS Lanarkshire, SCSCHF, Robert Gordon University, Glasgow
Caledonian University, universities of Aberdeen and Dundee.

Confirmation of Death

CS MEN has been working with NMAPH using a series of workshops involving NHS board experts and the ambulance service to develop consensus on a national document for the **Confirmation of Death** procedure and to develop a video resource which demonstrates best evidence based practice. This will ensure that practices in the procedure of confirming death by any registered healthcare professional in Scotland adhere to an agreed standard of practice.

6.15 Medical Simulation

Improving Surgical Training

We administered the implementation of a new Simulation Strategy, part of a 2 year UK-wide pilot called Improving Surgical Training which includes for CT1s a 4-day Boot Camp; a monthly teaching programme which includes simulation (e.g. stoma formation, plastic surgery techniques) and is open to trainees in both their first and second years also, in the first year, all trainees are loaned a take-home laparoscopic simulator and given online modules with tasks to practice, target scores to achieve, videos to upload, and an assessment at the end of the year.

In the second year, trainees attend a two day open surgery cadaveric course and a one day minimally invasive laparoscopy or arthroscopy course. The team is also trying to support local Skills Clubs in each hospital enabling trainees to practice their skills.

Internal Medicine Training

We also led on the administration processes for Internal Medicine Training (IMT) which replaces Core Medical Training. All 105 IMT1 trainees attended a three-day boot camp and were exposed to a variety of emergency situations through immersive simulation scenarios, with debriefs covering both technical and non-technical aspects.

Simulation in Psychiatry

The Simulation in Psychiatry Short Life Working Group, set up in 2018, aligns with the current NHS priorities relating to mental health and the advice of the NES Medical Simulation Collaborative. A survey of consultants and trainees in relation to their training needs was undertaken and for core psychiatry trainees; this highlighted the requirement for training in psychiatric emergencies, medical emergencies in psychiatric patients and learning about rapid tranquilisation, de-escalation and preparation for a tribunal.

The group also agreed a template for the development of immersive simulation scenarios and has gathered a number of examples including abdominal sepsis in patient with emotionally unstable personality; patient found hanging and detaining a patient under the Mental Health (Scotland) Act.

The group has also reviewed the protocols for rapid tranquilisation from 7 Health Boards which has highlighted variation in practice.

Looking ahead

We plan to:

- + pilot our latest online resource Faculty Development Tier 1
- + continue to increase the range of courses provided on the MSU in accordance with NES priorities
- + work with our partners to develop research projects on virtual reality and team working in relation to simulation and clinical skills
- develop an integrated approach to simulation based education for core psychiatry trainees which will provide a Once for Scotland approach to bring both added value to their 3 year core curricular programme and improve practices
- + look to embed the pilots for IST and IMT into NES core business
- + continue to develop our national network for clinical skills and simulation training for the NHS workforce

6.16 Continuing Professional Development (CPD) for Primary Care professionals and teams

- + Our Practice-based Small Group Learning (PBSGL) has remained popular in General Practice in Scotland with approximately 40% of Scotland's GPs being members of PBSGL groups. Pharmacist and nurse numbers have seen the highest growth in the past two years meaning that increasing numbers of groups are inter-professional.
- + We are supporting the development of PBSGL in other parts of the UK as well as in Denmark and Wales.
- + We deliver 'Cradle-to-Grave' and 'A Day in the Life of a Busy General Practice' CPD events across Scotland as well as a wide range of face-to face events and opportunities for peer review of criterion-based audit, significant event analyses and consultation skills to primary health care staff.
- + Through Scottish Government funding, we have significantly increased our educational opportunities for General Practice Nurses. Demand for these courses is high and they have evaluated exceptionally well.
- + Scottish Government funding has facilitated Appraisal Support Workshops across the country to assist GPs in their preparation for appraisal.
- + We have also received significant investment from Scottish Government to educationally support GPs in their first five years since qualification. This includes PBSGL membership, planning for a dedicated conference and beginning to conduct research to better understand the CPD needs of this group.

Looking ahead

We aim to increase the number of PBSGL groups/members in Scotland and to continue to increase inter-professional membership. We aim to deliver more workshops and skills based training to primary care staff in our centres in Glasgow, Edinburgh and Aberdeen

6.17 Grief and Bereavement

NES Bereavement Education Conference

- + We hosted the inaugural NES Bereavement Education Conference in November 2019: Starting with the end in mind; A realistic approach to bereavement and resilience
- + The Chief Medical Officer for Scotland opened the event and included reference to it in her December 2019 article in The Scotsman newspaper
- + Approaching 50% of allocated places went to doctors across Scotland, with close to 20 medical specialties represented
- + Evaluation forms were completed by approximately 65% of the 170 delegates with approximately 90% of those who attended stating that the aims of the conference were met. Also, all respondents either indicated that their personal objectives for attending were met in full (80%) or partially (20%), e.g.

'I had the chance to learn from passionate people at the top of their game and at the cutting edge of the Bereavement revolution.'

'one of the best run conferences I have ever been to.'

+ Short film clips from workshop and plenary sessions are available to view on NES' Support around Death website

Bereavement Charter for Scotland

We are part of a national coalition developing a human rights-based Bereavement Charter for Scotland. The Charter will go through a period of consultation from February to April and is anticipated to launch by the Autumn of 2020.

Educational resources

+ We have continued to add to the suite of animations which support practitioners in conversations around death, dying and bereavement. The short length and scenario-based focus of these films enhances learning and relevance within already busy clinical and educational environments. Delivering the news of a death by telephone is a new film that launched in 2019. The animations overall have now been viewed over 35,000 times. We continue to receive positive feedback regarding these materials and requests for permission to use them on a national and international basis within teaching courses and programmes, e.g.

'Fantastic videos. Use them regularly for teaching.'

'Great training resource that would be helpful to many different health and social care professionals.'

- + A video capturing the experiences of a multidisciplinary
 Emergency Department team on dealing with death and
 bereavement as part of their work is under development and is
 expected to launch by Autumn 2020. It will consider themes of
 staff health and wellbeing and is based on similar films which
 feature an <u>Air Ambulance and Scottish Mountain Rescue Team</u>
 (recently produced by a junior doctor in England).
- + We worked with third sector organisations and a range of healthcare professionals to develop educational resources f or staff that focus on increasing their <u>awareness of how to support LGBT+ people around death and bereavement.</u>
- + We continue to add content and make developments to the <u>Support Around Death website</u> that provides a range of information for health and social care professionals related to care before, around the time of and after a death. This year there have been over 16,000 users on the site with over 41,000 page views.
- + We continue to host quarterly learning events for the NHS Board Bereavement Lead and Strategic Coordinator network across Scotland, providing opportunity for the sharing of best practice regarding bereavement care/education on a national basis.
- + We continue to share information on our work via a <u>quarterly</u>
 <u>e-Newsletter</u> (approaching 1,200 subscribers), through
 social media and with support from the NES Corporate
 Communications Team.

- + We continue to work with the Death Certification Review Service to develop educational resources with a current focus on a top tips document for non-certifying staff.
- + This year we welcomed the opportunity to attend several conferences and events (as an exhibitor or poster presenter) to share information about NES' bereavement work. E.g. the Scottish Medical Education Conference, NHSScotland Event, Royal College of Obstetricians and Gynaecologists World Congress, Scottish Partnership for Palliative Care Annual Conference and Association for Palliative Medicine Palliative Care Congress.

Looking ahead

We will launch NES's bereavement national training framework for medical staff and will be continuing to develop educational resources for a toolkit of materials to support the implementation of the framework. This will include e.g. a mobile app to support bereavement-related communications and clinical cases for group discussions and simulation. We will be continuing to investigate how NES can support the educational and support needs of healthcare professionals regarding bereavement following suicide. Plans are also underway to host NES' second bereavement education conference on the 20th November 2020.

6.18 Remote & Rural Healthcare Alliance (RRHEAL)

- + We have continued to deliver monthly education sessions by VC around a host of topics via the RRHEAL VC Education Network and our Rural General Hospital VC Education Network sessions across a wide variety of topics specifically tailored to meet the needs of remote, rural and island practitioners. https://learn.nes.nhs.scot/902/rrheal/education-networks
- + We have completed initial work on the development of the first Scottish multi professional Rural Practitioner Advanced Level Education Programme in collaboration with the Scottish Rural Medical Collaborative. https://www.srmc.scot.nhs.uk/
- + We completed our work as part of the international Remote and Rural Recruitment and Retention Making it Work Project which has produced a Workforce Sustainability Framework and a range of practical tools. http://rrmakingitwork.eu/
- + We have worked with University colleagues to design a new Rural Hospital Practitioner High Dependency and Critical Care Accredited Programme.
- + We are working to design and develop the first Rural Health & Social Care Turas Learn site for and with Rural Health & Social Care Support Staff.
- We are pleased to be early adopters of NES TURAS Learn and a host of educational resources can be accessed here: https://learn.nes.nhs.scot/786/rrheal

Looking ahead

We are leading on the development of a proposal for a Centre of Excellence in Remote and Rural Training and Education with key partners across Scotland. RRHEAL, NES are providing leadership and support in developing this programme of work as part of our statutory responsibilities for NHS Scotland education and the coordination of remote and rural healthcare education developments across Scotland.

This programme of work will be developed in line with The Ritchie Report recommendations for a CoE that will also foster future workforce for remote and rural areas throughout Scotland. A project website has been launched to give access to documents and information relating to this work. www.ritchiereport.net

6.19 Practice Manager Development

- + We continue to deliver the Practice Managers Vocational Training Scheme. Cohort 15 commenced in September 2019 with 23 participants, a further 17 Managers completed the programme this year.
- + We have developed a Supervisory Management in General Practice programme. Cohort 1 commenced in May 2019 with 18 participants, Cohort 2 in October 2019 with 24 participants and Cohort 3 commenced in January 2020 with 40 participants.
- + We are undertaking work on Transforming Practice Manager and Administrative Staff Roles to support the evolving roles of Practice Managers and General Practice administrative staff. This is supported with Scottish Government funding.
- + We delivered 20 Practice Managers Educational Workshops, with workshops held across Scotland.
- + Local co-ordinators organised meetings in all territorial Health Boards, engaging with Practice Managers from across Scotland and providing an opportunity to share best practice.

6.20 General Practice Nurse Development

- + We are delivering and expanding the provision on the General Practice Nurse Programme for 2 cohorts in 2019–20.
 - Cohort 7 commenced September 2018 and 21 successfully completed.
 - Cohort 8 30 NQN commenced Feb 2019 and due to complete April 2021 commissioned by NES NMAHP through Scottish Government specific GPN funding.
 - Cohort 9 32 GPNs and 2 Prison Healthcare nurses commenced in September 2019
 - Cohort 10 26 NQN commencing March 2020 commissioned by NES NMAHP through Scottish Government specific GPN funding.
- Programme credit rated by QMU 60 points at Level 10
 renewed August 2019 for 5 years and awarded 3
 commendations, 5 recommendations, no conditions.
- + Collaborative cross directorate working continues with NMAHP around the GPN Transforming Roles programme to support the GPN refocused Role.
- + We have 18 Education Supervisors to support the GPN Programme with an additional 2 in training through completion of their master's level education at RGU.

- + We have 9 GPN Education Advisors across Scotland with ongoing work to assess refocus of the role to support the new GPN role.
- + GPN CPD is now supported by CPD Connect.
- + Development of a learning resource for the level 6 GPN in collaboration with NES NMAHP to support the refocused role of the GPN in line with the Transforming Roles Paper Developing the general practice nursing role in integrated community nursing. https://www.nes.scot.nhs.uk/media/4235323/cnod6.pdf
 Access the learning resource here: https://learn.nes.nhs.scot/23704/nursing-cpd/general-practice-nurse-cpd
- + Team are undertaking the revision of the Cervical Screening Education Standards supported by SG funding.
- + Significant social media presence of GPN Team to promote GPN professional identity and role.
- + Increased social media presence supporting and connecting GPNs across Scotland to reduce isolated working through main NES accounts on Facebook NES GPN and Twitter NES GPN.
- + NES Stars, Winner 2019 GPN Practice Nursing/CPD Connect team 'Look ahead and be creative'.

Alternative Formats



This resource may be made available, in full or summary form, in alternative formats and community languages. Please contact us on 0131 656 3200 or email <u>altformats@nes.scot.nhs.uk</u> to discuss how we can best meet your requirements.



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